Transportation and the Aging Population Presentation to the NC House Select Committee on Strategic Transportation Planning and Long Term Funding Solutions

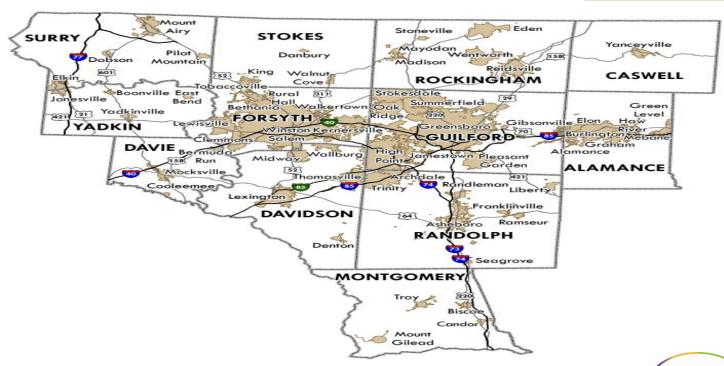
Blair Barton-Percival, Director
Piedmont Triad Regional Council Area Agency on Aging
January 8, 2018





Piedmont Triad Regional Council Area Agency on Aging

The Piedmont Triad Regional Council Area Agency on Aging (AAA) is one of 16 in North Carolina. More than 351,000 people age 60+ live in the Piedmont Triad Region.



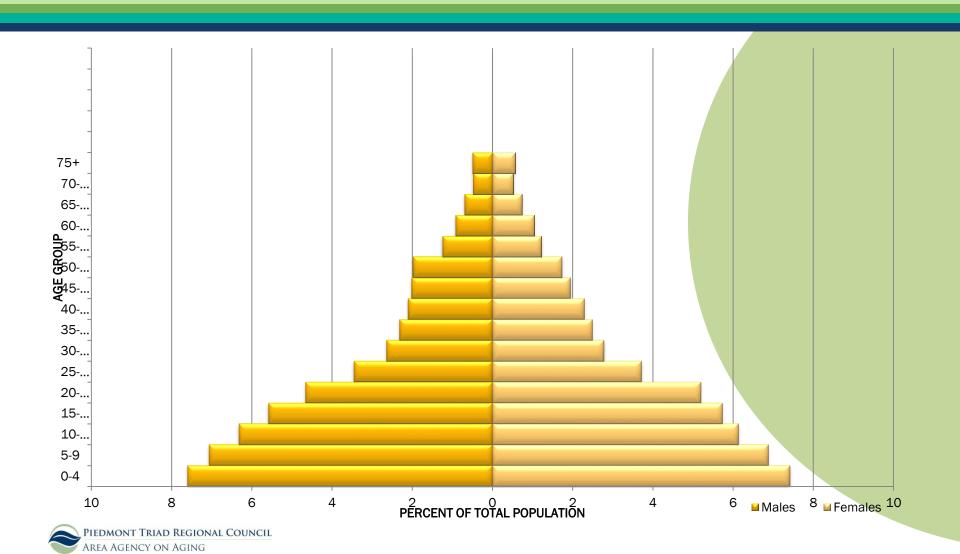


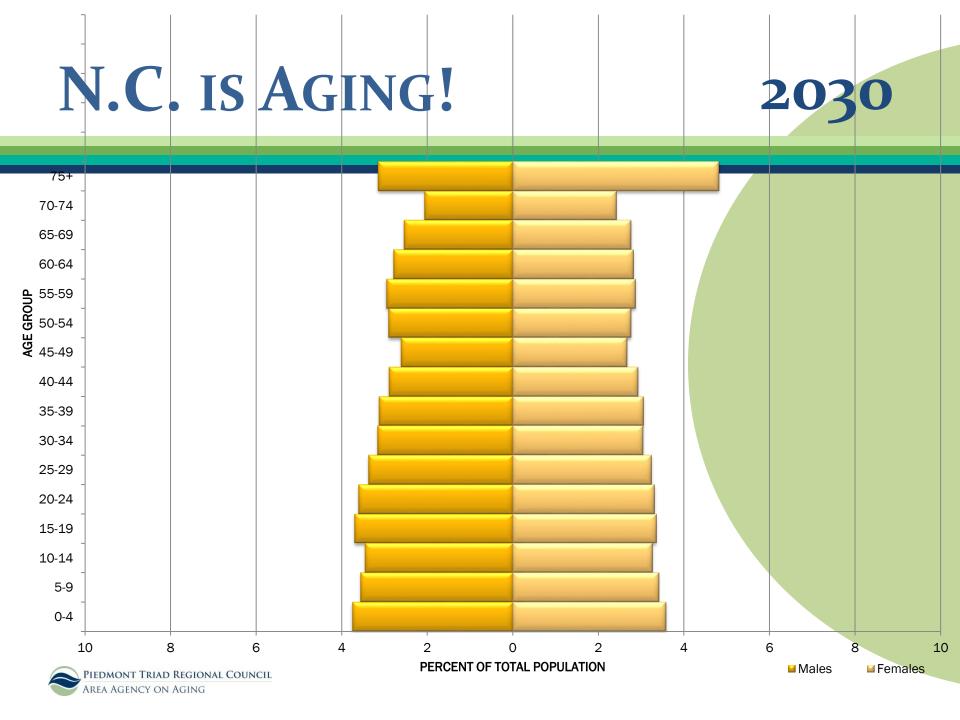
North Carolina Association of Area Agencies on Aging

Advocacy, Action, Answers on Aging



North Carolina 1900

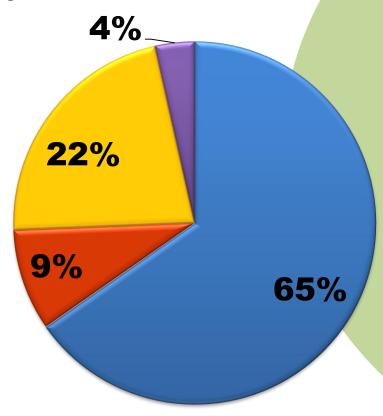




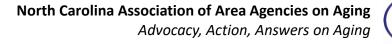
NC Demographics

People age 60 or older

- Family Household
- Living Alone -Men
- Living Alone Women
- Group Quarters









Ranked 9th in Age 65+ Population

Rank	State	Population (millions)
1	California	4.4
2	Florida	3.4
3	Texas	2.7
4	New York	2.6
5	Pennsylvania	2.0
6	Ohio	1.6
7	Illinois	1.6
8	Michigan	1.4
9	North Carolina	1.3
10	New Jersey	1.2



NC's Population age 60 and up

In 2016:

The number of persons age 60 and up in NC was 2,169,194.

This represents 21% of the population. This number is expected to rise to 26% over the next two decades.





How long might a person need transportation assistance?

Life Expectancy

Person's Age	Number of additional
in 2016	years expected to live
60-64	23.1
65-69	19.3
70-74	15.6
75-79	12.4
80-84	9.5
85+	7.1

NC State Center for Health Statistics





Transportation and Health

Transportation is an important social determinant of health in rural communities.

The availability of reliable transportation impacts a person's ability to:

- access appropriate and well-coordinated healthcare
- purchase nutritious food
- obtain medication and other healthcare supplies

Rural Health Information Hub





Transportation and Health

Adults who lack transportation to medical care are more likely to have chronic health conditions that can escalate to a need for emergency care if not properly managed.

Wallace, Hughes-Cromwick, Mull and Khasnabis (2005)







Transportation Barriers: Access to Healthcare

Transportation Barriers lead to:

- Missed or delayed appointments
- Delayed care
- Missed or delayed medication use
- Poorer management of chronic illnesses
- Poorer health outcomes

3.6 million people in the US do not obtain medical care due to transportation barriers. These individuals were more likely to be older, poorer, less educated, female, and from an ethnic minority group.

Sayed, Gerber and Sharp (2013)

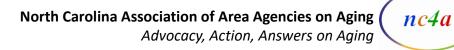




Transportation Barriers: Health and Environmental

- Unable to walk the distance to drop off/pick up sites
- Path to onboarding site is not navigable for persons with walking difficulties or assistive devices (ex. walker, cane)
- No stamina to wait for long periods for pick up
- No shelter at pick up site during inclement weather
- Traffic signal is too fast for them to cross safely





Transportation Barriers: Psychological and Emotional

- Finding information about resources
- Feeling vulnerable to other populations on the bus/van. Public transportation is referred to in the community as the "Mobile Mental Health Unit"
- Stigma-In rural communities- transport vehicle is referred to as the "Welfare Wagon".





Transportation Barriers: Logistical Barriers

- Many providers require 24-48 hour notice
- No weekend, after hours or emergency services
- Limited approved locations
- No helpers or aides provided for the vulnerable on the bus/van/train
- Door to door and door through door often not available





Benefits of Providing Transportation for the Aging

- Fewer missed appointments
- Reduced length of hospital stay
- Fewer emergency room visits
- Reduced costs of care

Wallace, Hughes-Cromwick, Bologna and Mull (2005)





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